

SERIAL NUMBER 09/135,988		FILING DATE 08/17/98	CLASS 435	GROUP ART UNIT 1633	ATTORNEY DOCKET NO. 24729-105C		
APPLICANT	BRUCE BRYAN, BEVERLLY HILLS, CA.						
	CONTINUING DOMESTIC DATA*** VERIFIED THIS APPLN IS A CIP OF 08/757,046 11/25/96 AND A CIP OF 08/597,274 02/06/96 PROVISIONAL APPLICATION NO. 60/079,624 03/27/98 PROVISIONAL APPLICATION NO. 60/089,367 06/15/98						
	371 (NAT'L STAGE) DATA*** VERIFIED						
	FOREIGN APPLICATIONS*** VERIFIED						
FOREIGN FILING LICENSE GRANTED 09/28/98 ***** SMALL ENTITY *****							
Foreign Priority claimed 35 USC 119 (a-d) conditions met		<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 58	INDEPENDENT CLAIMS 7
Verified and Acknowledged		Examiner's Initials Initials					
ADDRESS	STEPHANIE SEIDMAND HELLER EHRMAN WHITE & MCAULIFFE 4250 EXEUTIVE SQUARE 7TH FLOOR LA JOLLA CA 92307						
	BIOLUMINESCENT5 NOVELTY ITEMS						
TITLE							
FILING FEE RECEIVED \$1,042	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			

SERIAL NUMBER 0135,988	FILING DATE 08/17/98	CLASS 435	GROUP ART UNIT 1652	ATTORNEY DOCKET NO. 24729-105C
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APPLICANT: BRUCE BRYAN, BEVERLY HILLS, CA.

****CONTINUING DOMESTIC DATA*******
 VERIFIED THIS APPLN IS A CIP OF 08/757,046 11/25/96 *Pat 5,876,995*
 AND A CIP OF 08/537,274 02/06/96 *pro. lny*
~~PROVISIONAL APPLICATION NO. 60/379,624 03/27/98~~
~~PROVISIONAL APPLICATION NO. 60/339,367 06/15/98~~

****371 (NAT'L STAGE) DATA*******
 VERIFIED
N. M.

****FOREIGN APPLICATIONS*******
 VERIFIED
N. M.

FOREIGN FILING LICENSE GRANTED 09/28/98 ***** SMALL ENTITY *****

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 58	INDEPENDENT CLAIMS 7
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Verified and Acknowledged *N. M.*
 Examiner's Initials _____ Initials _____

ADDRESS
 STEPHANIE SEIDMAN
 HELLER EHRMAN WHITE & MCAULIFFE
 4250 EXECUTIVE SQUARE
 7TH FLOOR
 LA JOLLA CA 92307

TITLE
 BIOLUMINESCENT NOVELTY ITEMS

FILING FEE RECEIVED \$1,042	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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